



**California Conservation Corps
Watershed Stewards Program**
in partnership with AmeriCorps
Volunteer Liability Release- Adult



NAME OF WATERSHED _____ LOCATION _____
WSP CORPSMEMBER(S) _____ DATE _____

LIABILITY AND PUBLICITY RELEASE: By signing below, I release the Watershed Stewards Program (WSP), the State of California, the California Conservation Corps (CCC), and AmeriCorps of all liability from any harm or injury to my person and property resulting from my participation in this volunteer activity, I understand that my participation in any activity is fully voluntary. I am responsible for my own safety and well-being and for obtaining all safety information related to any activity I participate in. By signing below, I hereby authorize the Watershed Stewards Program to use photographs or other media material pertaining for the express purposes of publicity and documentation. I agree that while transported in WSP or CCC owned or operated vehicles, I will conform to all federal, state, and CCC policies, procedures, rules, regulations, directives and instructions. This includes, but is not limited to, the proper use of seatbelts and not extending limbs from or throwing objects in or from the vehicle. I agree to hold harmless the State of California, the CCC and WSP for any injuries sustained while being transported in said vehicles and that that this agreement compliments and does not replace or take precedence over the accompanying CCC 10 (if any).

EMERGENCY MEDICAL INFORMATION: If you have any allergies or medical conditions, please let the site coordinator know in case of emergency.

Print Name LEGIBLY!		Have you volunteered with WSP since October 1st?
		<input type="checkbox"/> Yes <input type="checkbox"/> No If yes, how many times? _____
Signature:	Emergency Contact Name:	Emergency Contact Phone #:

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